AFFIDAVIT OF CERTIFIED INSTALLER WHO EMPLOYS A MANUFACTURED HOME INSTALLER TRAINEE

STATE OF		
COUNTY		
NAME MANUFACTURE	ED HOME CERTIFIED INSTALLER	CERTIFICATION #
ADDRESS	CITY	STATE ZIP
NAME OF MANUFACTO	URED HOME INSTALLER TRAINEE	TRAINEE #
(Manufactured Hom	Works for me in my	business as a Certified Trainee
Installer of manufactu	red homes in Alabama. I understand that I w	Il be responsible for any damage
to homes caused by _	relate (Manufactured Home Installer Trainee)	ed to the transport or installation
of manufactured home	es for which I contract and authorize(Mar	
	•	,
·	stall. I also understand that I will be held resp	•
	ut my approval, related to the transportation a	
homes. I understand	and agree that in the event(Manufactured H	ome Installer Trainee) is no
longer associated with	n me in my business, that it is my responsibilit	y to immediately provide written
notice to the Alabama	Manufactured Housing Commission.	
	Signature of Certified Manufactured Hom	ne Installer
	Print or Type Certified Installer	
	Signature of Manufactured Home Installe	r Trainee
	Date	

Note: This form must be completed by the Certified Installer and provided to the Alabama Manufactured Housing Commission.